

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69007	9/28/99
O.I.P.E. CLASSIFIER		59	10/16/99
FORMALITY REVIEW	EA	60195	10/11/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	10/23/99
2	✓	✓	10/23/99
3	✓	✓	10/23/99
4	✓	✓	10/23/99
5	✓	✓	10/23/99
6	✓	✓	10/23/99
7	✓	✓	10/23/99
8	✓	✓	10/23/99
9	✓	✓	10/23/99
10	✓	✓	10/23/99
11	✓	✓	10/23/99
12	✓	✓	10/23/99
13	✓	✓	10/23/99
14	✓	✓	10/23/99
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47	✓	✓	10/23/99
48	✓	✓	10/23/99
49	✓	✓	10/23/99
50	✓	✓	10/23/99

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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